Your Your Your Attori	Name of Person Filing Document: /our Address: /our City, State, Zip Code: /our Telephone Number: Attorney Bar Number (if applicable): Representing Self or Attorney for							
			COURT OF ARIZONA COPA COUNTY					
IN TH	E MATT	TER OF:	Case Number:					
(Name(s) of Child(ren))			AFFIDAVIT SHOWING CIRCUMSTANCES WHY SERVICE BY PUBLICATION WAS USED AND ABOUT THE PUBLICATION (AFFIDAVIT OF PUBLICATION ATTACHED)					
1.	public	ake this Affidavit to tell the Court why service by publication was used, and to show how service by lication was done. I have read this document and know of my own knowledge that the facts stated true and correct.						
2.		to notify the other party of this court ca Avoiding service of proces legal documents: to the last known address of the ot	re, Rules 4.1(e) and 4.2(e), service by publication is se because the other party is: s. I have mailed, postage prepaid, a copy of the former party on or before the first date of Publication, forward. I have not mailed copies of the proceedings	Illowing				
3.	The residence and whereabouts of the other party's is unknown to me, even though I have made a diligent search to find out. My search failed to reveal any information that might lead to knowledge about the other party's residence or whereabouts. A search was made of the following records: (Be specific.) Telephone Directory/Directory Assistance. State the cities you called and the numbers you called.							
		Last Known Employer: State who y	ou talked with and when:					
		Relative or Friend of Other Party (\$	State who you contacted, his or her relationship to	he other				

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		Other things you did:	Case No			
4.	To the best of my knowledge, information, and belief, the other party is not in the military service of the United States.					
5.	The following document(s) was/were published in a newspaper in the county, where my case is pending on the following date: / /					
6.	A copy of the notice as published and the Affidavit of Publication is attached.					
			Your Signature			
	SUBSCRIBED AND SWORN to before me this date, by (Month, Day, Year)					
	Му Со	ommission Expires	Notary Public			

INSTRUCTIONS: ATTACH the original of the Affidavit of Publication from the Newspaper(s) to this page.